

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 845121

1. Entity Name

CALIFORNIA COMPENSATION INSURANCE COMPANY

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90121 041 ***150.00

Principal Place of Business

11171 SUN CENTER DR
RANCHO CORDOVA CA 95670
US

Mailing Address

11171 SUN CENTER DR
LEGAL DEPT
RANCHO CORDOVA CA 95670-6113
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-0631050

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32304

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GENTZ, WILLIAM L
26601 AGAOURA RD
CALABASAS CA 91302 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Richard Krenz, Esq.
26541 Agoura Road
Calabasas, CA 91302 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
NAGLE, ROBERT E
26601 AGOURA RD
CALABASAS CA 91302 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Patricia Staggs, Esq.
26541 Agoura Road
Calabasas, CA 91302 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
LAI, DORIS K T
26601 AGOURA RD
CALABASAS CA 91302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Doris K. T. Lai
26541 Agoura Road
Calabasas, CA 91302 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
NIENOW, TRECIA M
11171 SUN CENTER DR
RANCHO CORDOVA CA 95670 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President/Assistant Secretary
Trecia M. Nienow, Esq.
11171 Sun Center Drive
Rancho Cordova, CA 95670 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SEAMAN, J. CHRIS
26601 AGOURA RD
CALABASAS CA 91302 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chief Financial Officer
David Jolliffe
26541 Agoura Road
Calabasas, CA 91302 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BOGGS, JR, THOMAS I
26601 AGOURA RD
CALABASAS CA 91302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Thomas I. Boggs, Jr.
26541 Agoura Road
Calabasas, CA 91302 ☒ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Trecia M. Nienow, Assistant Secretary 04/28/00 916.859.6536

Date

Daytime Phone #

CR2E034 (9/99)